

**SENDER: COMPLETE THIS SECTION**

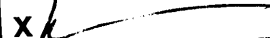
- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

William S McLaurine, II  
222 Tichenor Ave  
Apt No. 4  
Auburn, AL 36830

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

☐ Agent☐ Addressee

B. Received by (Printed Name)

William McLaurine

C. Date of Delivery

2-6-07

D. Is delivery address different from item 1? ☐ Yes

If YES, enter delivery address below:

☐ No

3:06-1014  
# 33 order

3. Service Type

☐ Certified Mail☐ Express Mail☐ Registered☐ Return Receipt for Merchandise☐ Insured Mail☐ C.O.D.

4. Restricted Delivery? (Extra Fee)

☐ Yes

2. Article Number

(Transfer from sender)

7005 1820 0002 3465 0030

PS Form 3811, February 2004

Domestic Return Receipt

102595-02-M-1540